

# Request to Pay Form

Please mail to:  
Susie Duff  
Treasurer- Big Sky Region  
505 Four Jacks Lane  
Hamilton, MT 59840  
Email: [inthebitterroot@gmail.com](mailto:inthebitterroot@gmail.com)



Name of Requestor: \_\_\_\_\_

Name of Payee: \_\_\_\_\_

I request payment for the person listed above in conjunction with \_\_\_\_\_

on (date/s) \_\_\_\_\_

1. Travel

1. Milage: \_\_\_\_\_ @ .35/mile ..... \$ \_\_\_\_\_

2. Tickets (receipts must be attached) ..... \$ \_\_\_\_\_

2. Fee (instruction, certification, etc.) ..... \$ \_\_\_\_\_

3. Other (please explain below) ..... \$ \_\_\_\_\_

Total: \_\_\_\_\_

DC or RS approval: \_\_\_\_\_

Send Check to : \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**For Office Use Only:**

Received: \_\_\_\_\_

Approved: \_\_\_\_\_

Date Paid: \_\_\_\_\_

Check No.: \_\_\_\_\_